



Community Development Department • 500 Castro Street • Post Office Box 7540 • Mountain View, California 94039-7540
PHONE 650-903-6379 • FAX 650-962-6048

2009-10 Community Development Block Grant Program Client Report Form

Name of Grantee/Program: _____

Reporting Period From: _____ to _____
(mm/dd/yyyy) (mm/dd/yyyy)

Number of Unduplicated Mountain View Clients: _____

Number of Extremely Low Income Clients: _____ Number of Low Income Clients: _____

Number of Very Low Income Clients: _____ Number of Other Income Clients: _____

Number of Female Headed Households: _____ Number of Male-Headed Households: _____

Racial Categories	Race Responses	Race Responses that are also <u>Hispanic or Latino</u>
White		
Black or African American		
Black or African American <i>and</i> White		
American Indian or Alaska Native		
American Indian or Alaska Native <i>and</i> White		
American Indian or Alaska Native <i>and</i> Black or African American		
Asian		
Asian <i>and</i> White		
Native Hawaiian or Other Pacific Islander		
Other multiple race combinations		
Totals		

Instructions for Completing the Client Report Form

Name of Grantee: Enter your Agency's Name

Reporting Period: Enter the Date, Day and Month for the Beginning and end of the period for which your agency is reporting.

Number of Unduplicated Mountain View Clients: Enter the number of unduplicated Mountain View clients that you served during the report period. Unduplicated means that the client did not receive the service unit that you are reporting more than once in the current fiscal year.

Income Definitions

"Extremely Low" - participant is at or below 30% of median income as adjusted for size of household;

"Very Low" - participant is between 31% and 50% of median income as adjusted for size of household;

"Low" - participant is between 51 % and 80% of median income as adjusted for size of household; and

"Over" - participant whose income is above 80% of median income as adjusted for size of household.

"Female Head of Household" - a married or unmarried female who maintains a household for a dependent, or non-dependent relative, and provides more than half of the dependent's financial support.

"Male Head of Household" - a married or unmarried male who maintains a household for a dependent, or non-dependent relative, and provides more than half of the dependent's financial support.

Instructions for Completing the Racial and Ethnic Categories Chart

The two ethnic categories defined below:

Non Hispanic or Latino. A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."

The racial groups are defined below:

White. A person having origins in any of the original peoples of Europe, or the Middle East.

Black or African American. A person having origins in any of the black racial groups of Africa. Terms such as "**Haitian**" or "**Negro**" **can be used in addition to "Black" or "African American."**

American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Other multiple race combinations. This block is intended to capture the balance of any racial categories that are not included in the list of nine above. Be sure to also indicate whether the "Other" person is Non Hispanic/Latino or Hispanic/Latino.